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APPLICANTS

Guy Scott Bristol, Shoreview, MN;

 Peter Joseph Kovach, Fridley, MN;
 Keith Jasperson, Andover, MN;

JNK

** CONTINUING DATA *****

This appln claims benefit of 60/278,820 03/26/2001

JNK

** FOREIGN APPLICATIONS *****

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

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35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged Examiner's Signature _____ Initials _____				

ADDRESS

 022859
 INTELLECTUAL PROPERTY GROUP
 FREDRIKSON & BYRON, P.A.
 200 SOUTH SIXTH STREET
 SUITE 4000
 MINNEAPOLIS , MN
 55402

TITLE

Implantable therapeutic substance infusion device configuration system

FILING FEE RECEIVED 1190	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____
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